## Instructions

## **E55 - Stage II Gasoline Throughput**

Please complete this form and return to the address below **NO LATER THAN APRIL 15** of the year after the reporting year. Complete the requested information for each facility on a separate form. **Only include facilities located in Metro Louisville/Jefferson County, Kentucky.** 

For **Plant ID**, for facilities covered by a Title V operating permit, enter the plant ID (also called EIS number) assigned to this facility by the Louisville Metro Air Pollution Control Distict. If the facility has only a gasoline dispensing permit, then enter the permit number on the facility's APCD gasoline dispensing operating permit.

In the table, list the amount dispensed in each month of the reporting year. If a facility has more than one tank for a specific grade, combine those amounts in the same column.

The "Page Identifier" box at the bottom of the form is provided as a place where you can enter your own identifier for each copy of this form among the other pages in your emissions inventory submittal.

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## Louisville Metro Air Pollution Control District Form E55 - Stage II Gasoline Throughput

Plant ID:		or gas operating pe	ermit #			Emission Year:	
Company Name:							
Facility Na	ame:					]	
Facility Street Address:							]
Compan	y Contact P	erson:					•
Name:	ame:			Title:			
Phone #:			E-Mail Address:				
Mailing A	ddress:					]	
City:			State:		ZIP Code:		]
,	Throughputs (gallons)						]
	Month					Discol	
	Month	Regular	Plus	Р	remium	Diesel	
	January						
	February March						
	April						
	May						
	June						
	July						
	August						
	September						
	October						
	November						
	December						
	Total						
		Certificati	ion by Respor	nsible	e Official		
Based on	information an		reasonable inquiry,			ements and informat	ion in this
		documen	nt are true, accurate,	and co	mplete.		
Signature					Date:		
Printed Name:					Title:		
Phone #:			E-Mail Address:				
			pursuant to LMAPCD Reg				
	official" as defined in the compain of the compain		16, Section 1.36. For all o	ner perm	nitied sources, the	e certifying individual shall	be an
				Pac	e Identifier:		